MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/598124

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓							51						
2		✓						52						
3		✓						53						
4		✓						54						
5		✓						55						
6		✓						56						
7		✓						57						
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11		✓						61						
12		✓						62						
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44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	2							TOTAL IND.						
TOTAL DEP.	14							TOTAL DEP.						
TOTAL CLAIMS	16							TOTAL CLAIMS						

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number

10/598124

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐ OR		OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES			RATE	FEE	RATE	FEE
BASIC FEE	SMALL ENT. = $ 150	LARGE ENT. = $ 300	BASIC FEE		OR BASIC FEE	380
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = $ 50 / $ 100	All other situations = $ 100 / $ 200	EXAM. FEE		EXAM. FEE	200
SEARCH FEE	U.S. is ISA = $ 50 / $ 100 ALL other countries = $ 200 / $ 400	ALL other situations = $ 250 / $ 500	SEARCH FEE		SEARCH FEE	450
FEE FOR EXTRA SPEC. PGS.	19 minus 100 =	/ 50 =	X $ 125 =		X $ 250 =	
TOTAL CHARGEABLE CLAIMS	16 minus 20 = * —		X $ 25 =		OR X $ 50 =	
INDEPENDENT CLAIMS	2 minus 3 = *		X $ 100 =		OR X $ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT		☐	+ $ 180 =		OR + $ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL		OR TOTAL	1022

CLAIMS AS AMENDED - PART II

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
						RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
AMENDMENT A	Total	*	Minus	**	=	X $ 25 =		OR X $ 50 =	
	Independent	*	Minus	***	=	X $ 100 =		OR X $ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ $ 180 =		OR + $ 360 =	
						TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
AMENDMENT B	Total	*	Minus	**	=	X $ 25 =		OR X $ 50 =	
	Independent	*	Minus	***	=	X $ 100 =		OR X $ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ $ 180 =		OR + $ 360 =	
						TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.